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CLAIMS	(1) FOR	(2) NUMBER FILED	(3) NUMBER EXTRA	(4) RATE	(5) CALCULATIONS
TOTAL CLAIMS (37 CFR 1.16(c) or (j))	59	-20* =	39	x \$ 18.00 =	\$ 702.00
INDEPENDENT CLAIMS (37 CFR 1.16(b) or (i))	3	-3** =	0	x \$ 84.00 =	
MULTIPLE DEPENDENT CLAIMS (if applicable) (37 CFR 1.16(d))				+\$ _____ =	
				BASIC FEE (37 CFR 1.16)	740.00
				Total of above Calculations =	\$1,442.00
Reduction by 50% for filing by small entity (Note 37 CFR 1.27).					
* Reissue claims in excess of 20 and over original patent. ** Reissue independent claims over original patent.					
TOTAL =					\$1442.00

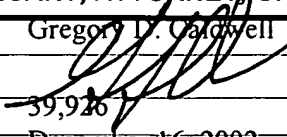
6. ☐ Small entity status: Applicant claims small entity status. See 37 CFR 1.27.
7. The Commissioner is hereby authorized to credit overpayments or charge the following fees to Deposit Account No. _____ - 02 2666 :
- a. ☐ Fees required under 37 CFR 1.16.
b. ☐ Fees required under 37 CFR 1.17.
c. ☐ Fees required under 37 CFR 1.18.
8. ☒ A check in the amount of \$1,442.00 is enclosed.
9. ☐ Payment by credit card. Form PTO-2038 is attached.
10. ☐ Applicant requests suspension of action under 37 CFR 1.103(b) for a period of _____ months (not to exceed 3 months) and the fee under 37 CFR 1.17(i) enclosed.
11. ☐ New Attorney Docket Number, if desired
(Prior application Attorney Docket Number will carryover to this CPA unless a new Attorney Docket Number has been provided herein.)
12. a. ☐ Receipt for Facsimile Transmitted CPA (PTO/SB/29A)
b. ☒ Return Receipt Postcard (Should be specifically itemized, See MPEP 503)
13. ☒ Other: Petition for Revival of an Application for Patent Abandoned Unintentionally Under 37 CFR 1.137(b); Petition fee of \$1280.00

NOTE: The prior application's correspondence address will carry over to this CPA UNLESS a new correspondence address is provided below.

10. NEW CORRESPONDENCE ADDRESS

<input checked="" type="checkbox"/> Customer Number of Bar Code Label				or <input type="checkbox"/> Correspondence address	
		08791			
Name					
Address					
City		State		Zip Code	
Country		Telephone		Fax	

15. SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED

NAME (Print/Type)	Gregory D. Caldwell
SIGNATURE	
Registration No. (Attorney/Agent)	39,926
DATE	December 16, 2002

U.S. PATENT & TRADEMARK OFFICE
DEC 16 2002

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FEE TRANSMITTAL for FY 2003

Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27.

TOTAL AMOUNT OF PAYMENT (\$)
2,722.00

Complete if Known

Application Number 09/336,933
Filing Date June 21, 1999
First Named Inventor Mark C. Liefer
Examiner Name P. Tran
Group/Art Unit 2684
Attorney Docket No. 15685P024

METHOD OF PAYMENT (check one)

☒ Check ☐ Credit card ☐ Money Order ☐ Other ☐ None
☐ Deposit Account

Deposit Account Number 02-2666
Deposit Account Name Blakely, Sokoloff, Taylor & Zafman LLP

The Commissioner is authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☒ Credit any overpayments
☒ Charge any additional fee(s) required under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20
☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account

FEE CALCULATION

1. BASIC FILING FEE

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1001	740	2001	370	Utility filing fee	
1002	330	2002	165	Design filing fee	
1003	510	2003	255	Plant filing fee	
1004	740	2004	370	Reissue filing fee	
1005	160	2005	80	Provisional filing fee	
SUBTOTAL (1)					

2. EXTRA CLAIM FEES

Total Claims 20* = 0 x 18.00 = \$0.00
Independent Claims 3* = 0 x 84.00 = \$0.00
Multiple Dependent

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1202	18	2202	9	Claims in excess of 20	
1201	84	2201	42	Independent claims in excess of 3	
1203	280	2203	140	Multiple Dependent claim, if not paid	
1204	84	2204	42	**Reissue independent claims over original patent	
1205	18	2205	9	**Reissue claims in excess of 20 and over original patent	
SUBTOTAL (2)					0.00

*or number previously paid, if greater, For Reissues, see below

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1051	130	2051	65	Surcharge - late filing fee or oath	
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet.	
2053	130	2053	130	Non-English specification	
1812	2,520	1812	2,520	For filing a request for ex parte reexamination	
1804	920 *	1804	920 *	Requesting publication of SIR prior to Examiner action	
1805	1,840 *	1805	1,840 *	Requesting publication of SIR after Examiner action	
1251	110	2251	55	Extension for reply within first month	
1252	400	2252	200	Extension for reply within second month	
1253	920	2253	460	Extension for reply within third month	
1254	1,440	2254	720	Extension for reply within fourth month	
1255	1,960	2255	980	Extension for reply within fifth month	
1404	320	2401	160	Notice of Appeal	
1402	320	2402	160	Filing a brief in support of an appeal	
1403	280	2403	140	Request for oral hearing	
1451	1,510	2451	1,510	Petition to institute a public use proceeding	
1452	110	2452	55	Petition to revive - unavoidable	
1453	1,280	2453	640	Petition to revive - unintentional	1,280.00
1501	1,280	2501	640	Utility issue fee (or reissue)	
1502	460	2502	230	Design issue fee	
1503	620	2503	310	Plant issue fee	
1460	130	2460	130	Petitions to the Commissioner	
1807	50	1807	50	Processing fee under 37 CFR 1.17(q)	
1806	180	1806	180	Submission of Information Disclosure Stmt	
8021	40	8021	40	Recording each patent assignment per property (times number of properties)	
1809	740	1809	370	Filing a submission after final rejection (37 CFR § 1.129(a))	
1810	740	2810	370	For each additional invention to be examined (37 CFR § 1.129(b))	
1801	740	2801	370	Request for Continued Examination (RCE)	
1802	900	1802	900	Request for expedited examination of a design application	
Other fee (specify) Filing fee					1,442.00

* Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$)
2,722.00

SUBMITTED BY

Complete (if applicable)

Name (Print/Type) Gregory D. Caldwell
Registration No. (Attorney/Agent) 39,926
Telephone (503) 684-6200
Signature [Signature]
Date

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-309.

Burden Hour Statement: This form is estimated to take 12 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on this form, including suggestions for improvement, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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OFFICE OF PETITIONS